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# THE AMERICAN JOURNAL OF NURSING

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## EDITORIAL COMMENT



### THE CONFUSION OF EXISTING CONDITIONS

WE are living in an age when reforms and criticisms are rife all over the world. It is seen in the keen interest in the affairs of government, both local and national. It is seen in all educational work, higher and lower, technical and professional. Some of the criticism seems to be honest and to be made for the purpose of improving conditions by establishing methods of greater efficiency; a great deal of it, given with a very pious air, is prompted by jealousy or graft.

Parents are criticizing the methods used in the schools; universities and preparatory schools find fault with each other's methods. The members of a profession not only see flaws in the work of another, but groups in the same profession attack each other's intents and purposes. Doubtless much of this ferment is healthful and indicates progress; some of it is harmful and is intended to block progress. The various opinions expressed in regard to any subject brought forward are confusing, even to one who has leisure to read and study, and may prove quite misleading to those who are too busy to read widely enough to gain a broad point of view.

No group of educators and workers has been more subjected to criticism than the teachers and graduates of schools of nursing. Some of it is undoubtedly sincere, much of it suggestive and helpful, but a great deal comes from those who see in the movement for higher education for nurses the cutting off of a means of revenue which threatens to destroy their business. Such criticisms are specially prominent in commercial magazines, and are made by those connected with short-course and correspondence schools and by the proprietors of hos-

pitals who have found in the maintaining of a training school without standards a means of increasing the dividends on their investments, or by ill-trained physicians who fear a competitor in the competent nurse.

#### THE PHYSICIANS' NATIONAL BOARD OF REGENTS

THIS title designates one of the most confusing of the commercial enterprises which we have commented on before in these pages, and which has been forced on our notice recently by various pamphlets, circulars, etc., which are being distributed.

We find upon investigation that this organization emanates from The Philadelphia School for Nurses which, as is very well known, is one of those short-course schools which professes to teach all there is to know about nursing theoretically in the period of a few weeks.

This board has established a national organization which seems to have as its object the maintenance of a national registry for commercial purposes. By the beguiling influence of grandiloquent language it seems to cover its real purpose and forms an inviting trap for the unwary. On the covers of the pamphlet at hand we read in large letters, "The Nurse's Credentials. Authority and Right to Engage in the Profession of Nursing. Classification and Listing."

In this scheme nurses are divided into four classes, the fee for registration varying from ten dollars to six, with a dollar extra for a pin, and another for a little magazine published. Those so enrolled are to be known as "commissioned and official nurses." As a registry for the short course and correspondence schools, this Physicians' National Board of Regents is harmless enough, but the pity of it is that many a properly trained nurse will be innocently attracted by the inducements offered and will pay her ten or twelve dollars to this organization only to find when too late that she has identified herself with a money-making enterprise which is seeking to undermine the standards of her chosen calling. The circulars are being very generally distributed throughout the country, and many nurses in isolated places, who have not kept in touch with the progress of nursing affairs, will be misled by the ingenious wording into thinking they are paying a registration fee.

A suggestion which has come to us in connection with this scheme, and which would be good even if this menace had not arisen, is that in each state association there should be established a publicity committee which should have for its purpose the enlightenment of the public in regard to the true motives for state registration, the standards which nurses are working for, and of their efforts for thorough education,—

that of producing more efficient nurses who shall give better service to the sick,—and that they shall cease to be a means of revenue to a group of men whose motive is a commercial one and not the welfare of those they serve.

#### PRIVATE DUTY PROBLEMS

IN a "Letter to the Editor" of November, 1908, Miss Huntington advocated a plan for private duty nurses which she was trying, and in the letter department of this magazine she comments on the way it is working out,—it is that of day duty only for the nurse, in cases where the patient is not in extreme danger.

She stays with her patient all day, concentrating so far as is possible the necessary treatment within those hours, and at night goes home to sleep. She has, of course, the consent and co-operation of the attending physician, who agrees to the plan and allows the patient to sleep undisturbed at night as long as possible. Miss Huntington's argument is that the patient does better for the undisturbed rest, that some member of the family who has had an opportunity to rest during the day can be on hand at night in case any one is needed, and that she herself is in better condition to give the patient her very best care during a long case by having good rest at night. This might seem to the casual reader a plan formed wholly for the comfort of the nurse, but knowing Miss Huntington's reputation for careful, faithful work, we know that in her hands such a method would be carried out with an eye to the patient's good. Whether it could be trusted to the discretion of the average nurse is doubtful. It must be borne in mind that this plan is not advocated in those cases where the illness is critical.

When two nurses are on a case, it is almost always better to let the one who is off duty go home to rest, as it takes her away from the atmosphere of sickness and anxiety and brings her back fresh and rested. When one nurse alone is on duty, it would be difficult to decide when a nurse could be spared at night. Often when all seems to be going smoothly, unexpected complications arise which require better judgment than the untrained watcher would possess, and the patient's life might be in jeopardy while the physician and nurse were being summoned. One of the great comforts of the nurse to the physician is that he may leave the patient in her hands knowing that he is under skilled observation during his absence, that he will be called if needed, and that he will not be called unnecessarily. How often must the nurse soothe the anxieties of the friends over some slight but not alarming change in the patient and insist that the doctor need not be roused.

In many cases the plan might work well, but how can even the doctor and nurse decide when it is safe? The principle is sound, that a rested nurse gives better service than a tired one. It would be interesting to know whether other nurses have tried this plan, and with what success.

Private duty nurses will be interested in last month's announcements by the Associated Alumnae, with its promise of a special session devoted to their problems.

Our series of articles on obstetrical diet lists is completed in this issue of the JOURNAL, and a letter from a correspondent brings up a new subject for exchange of opinion,—that of the amusement of the sick or convalescent child. We wish every nurse who has succeeded in keeping her child patients happy during convalescence or isolation would write us of her experience, even one suggestion contained in a single paragraph would be helpful to some one else, while short articles on the subject would be welcomed. It is hoped that head nurses may furnish some of the papers, telling what plans are adopted in hospitals and wards for children.

Dr. Potter's articles always bring words of appreciation from our readers, who will be glad to hear that she hopes to follow her paper on "The Hygiene of Menstruation" by one on "The Menopause." Another woman physician, a new contributor to our pages, sends us several articles which will appear from time to time on such practical subjects as "Seasickness," "Insomnia," "How to Prepare an Insane Patient for Operation," etc.

It is hoped that from the obstetrical diet lists many nurses will take suggestions that will be helpful to them, particularly for suppers, which seem always hardest to make attractive. Miss Holmes and Miss Sherman both lay stress on the need of making the diet laxative, and we think many a nurse will want to try for her patient the fruit juice at night treatment.

Miss Sherman's comments on the course pursued when a mother finds it difficult to nurse her baby should, we think, be taken very guardedly. We have no doubt in actual practice she makes as diligent efforts as any of us to increase the waning milk supply. Doctors are emphasizing more than ever the importance of breast feeding; we see this continually in the articles in medical journals and it was made the great point at the Congress on Infant Mortality. Obstetricians who are trying harder than before to educate mothers to an understanding of the importance of nursing their children must have the unfailing co-operation of the nursing profession.

If the milk supply can be kept up during the weeks spent in-doors, the quantity may become ample when the mother gets out for daily walks. These should be short at first, but should be increased with growing strength until at least a mile of such exercise is part of the daily programme. This has a direct and beneficial effect.

Another important point which cannot be too often emphasized is that where artificial feeding must be resorted to for a time, to "piece out," it should never be used in place of the breast feeding but in addition to it. The minute the demand on the breasts lets up, the supply will diminish still more. There should be regular and faithful feeding from both breasts at each nursing period in order to stimulate the glands to do their best, and the artificial feeding should be added only to complete the amount needed to satisfy the baby's hunger. Faithful persistent efforts on the part of the nurse, supplementing the advice of the doctor, will have great influence on the mother's mind, and wonders may be accomplished where conditions seemed most unfavorable.

#### THE JOURNAL PURCHASE FUND

THE pledges made at Minneapolis are being fulfilled, and news from many points shows that the societies are making plans for a thorough canvass for the individual fifty-cent subscriptions, which would, if adopted by all affiliated societies, result in the raising of the whole amount needed without hardship to any treasury or to any individual.

The appeals made by the local associations are often so good that they are applicable to a larger audience. We present this month two extracts taken from the St. Luke's *alumnæ* leaflet, Chicago.

The first, written by "E. E.": The National *Alumnæ* Association now owns in the neighborhood of fifty shares in the *AMERICAN JOURNAL OF NURSING*. Having gained controlling interest it seems desirable to purchase the *JOURNAL* outright.

With a membership of 15,000 self-supporting women this should not be a difficult undertaking, nor will it be if the individual members show a personal interest and pride in the matter and a sense of obligation.

At the convention held in Minneapolis last year, it was suggested that the amount could be easily raised if each nurse would contribute 50 cents. The members of our association present started the good work by making the first contribution of \$2.50. Now we wish every member of our *alumnæ* association to follow the example set by our delegates and show their interest in this splendid movement.

Please do not consider it so small an affair that it is not worth

taking the trouble to remit the amount asked for to our secretary. For it is only by the co-operation of the many that this scheme will be successful.

If 50 cents seems too little, more will be accepted. Please do *something* and, "lest we forget," do it now, at once. Money may be sent to our secretary, who also receives subscriptions for the JOURNAL, \$2.00 a year. The magazine is devoted to all branches of nursing work and is indispensable to the nurse who wishes to keep abreast with the work of her profession.

Another article in the same leaflet has a bearing, not only on the JOURNAL question, but on problems common to most state associations. By A. E.:

How can we induce nurses to join the state association?

This is one of those questions which is forever and eternally being asked by those who are devoting time and energy to the work of that same state association. To them it seems that this ought not to be a difficult task, but it is. The vast majority of our profession is doing "private duty," and great, noble, and self-sacrificing as is the work of the private duty nurse, it is a narrow groove. It is the private duty nurse who makes the cry for articles on "how to do things," instead of "what is being done in the nursing world," who will tell you she prefers *The Trained Nurse* to THE AMERICAN JOURNAL OF NURSING because it has articles on how to care for a typhoid patient, and how to modify milk; not seeming to grasp that the doctor for whom she is nursing will tell her how to modify the milk and what he wants done for the patient, and that for good useful information on the changes of the times, an up-to-date medical magazine such as *The Journal of the American Medical Association* will help her much more than some individual nurse's ideas on the instructions she has obtained second hand from a doctor who has obtained his from that same journal, and that his instructions have lost some of their vital points, very much as the original whisper has lost its identity in the old-fashioned game of scandal.

This, as a preface, may seem far from the mark, but I hope to prove that it is not. The question with which one is met when she asks "Will you join the state association?" or "Why don't you join the state association?" is generally, "What good will it do me?" an unanswerable question to some, more hopeful to others. What do we get out of anything in this weary world? What we put in of our own selves, our personality, our energy, and our enthusiasm. Those of you who do not read THE AMERICAN JOURNAL OF NURSING perhaps do not

realize the importance of the nursing profession, as a profession, to-day. We have attained to the dignity of a profession through the acknowledgment of that fact by twenty-three different states with the District of Columbia. Nurses, through their training and manifest fitness, are being sought for in all kinds of positions; in social and philanthropic work. The United States Government has recognized the profession at its highest when it demands that the nurses who enter its army and nursing corps shall be *registered* nurses. The cities show the importance of the nursing profession when they put nurses in the public schools; the state in trying to place nurses in the almshouses and hospitals for the insane. The United States Government in the War Department has given us seven nurses on its Red Cross Central Committee on Nursing. Training schools through the country are striving to put their curricula on a level at least with the minimum requirements of the state boards of nurse examiners. The different federations of women's clubs are putting nurses on all their philanthropic committees, and their committees on social hygiene—why? Because nurses are trained workers, trained in just the lines to make all their efforts tell. What has made the medical profession what it is to-day, a power for good in the community, a force for the betterment of conditions throughout the country and even in politics? The organization of the city, state and county medical associations, not to be a member of which stamps a man as either an old fogey or below the mark. What do they get out of it? The wonderful inspiration of organization, of being in touch with the best, of helping, if but with one's name. Just so have all the higher activities of the nursing profession sprung from organization—the alumnae association, the Associated Alumnae and, needing something less unwieldy for matters nearer home, the state association. To the state associations we owe registration and the recognition of nursing as a profession. That is something which aims higher than a mere livelihood, to the betterment of the world at large, to a larger and broader outlook for ourselves, to wider reaching interests even though we ourselves continue private duty nurses to the end. Still we are doing all the work of the state and national associations, for we are members. \$3.00 a year! Two theatre tickets at \$1.50 each, in a year! Who will dare say they cannot afford it?

#### THE ASSOCIATED ALUMNÆ

LET us remind our associations everywhere that plans should be definitely made as soon as possible for the sending of delegates to New York for the national meetings, and that individual members should be



encouraged to go at their own expense in addition to the official representatives. The more who go, the more life and interest will be added to the home work. There is nothing to compare with meeting others engaged in the same work for the strengthening of purpose, the raising of ideals, and the broadening of outlook. Those societies that seem half dead or asleep, and there are a few such, should make the most strenuous efforts to get as many members to these meetings as possible. We recapitulate the plans given in the official department last month for those who may have forgotten and who need something to refer to.

The Superintendents' Society will hold its meeting on May 16 and 17 in New York City at the Academy of Medicine, 43d Street. On Wednesday afternoon, May 18, the two national associations will meet together at Teachers' College to celebrate the founding of the first training school in London by Florence Nightingale. The Associated Alumnae will meet in New York City on May 18, 19, and 20. The morning session of the 18th will be at the Park Avenue Hotel, 32d and 33d Streets, which has been selected as headquarters. Those who have never been in New York will be glad to know that this hotel is on the Fourth Avenue car line which passes the Grand Central Station, and is about eight blocks away from it, less than half a mile. The meetings of the 19th and 20th will be held in Mendelssohn Hall, 113 West 40th Street.

There will be an interesting and educational exhibit of occupations for invalids in connection with the convention.

The entertainments will include a harbor trip for the 21st, concluded by tea at the new Bellevue nurses' home, one of the largest and finest in the world as far as we know, with Miss Goodrich as hostess.

Those who can do so should plan to make the convention a part of the summer vacation, staying on in the city after the close of the meetings. We refer those who wish to see the sights of the city without great expense to the articles by Miss Thornton on "What to See in New York," which appeared in the JOURNAL for January and February of this year.

Where large companies of nurses are travelling together, they should try to get some reduction in rates. On some roads special rates may be had by parties of ten.

#### THE NEW COURSE AT TEACHERS' COLLEGE

A RECENTLY-ISSUED bulletin of Teachers' College gives the first definite outline for work in the new course made possible by Mrs. Helen Hartley Jenkins's gift. The old department of Hospital

Economics becomes the Department of Nursing and Health and comprises four courses: (1) teaching and supervision in training schools for nurses; (2) general administration in training schools and hospitals; (3) public service as teacher-nurses, visiting nurses, and board of health assistants; (4) admission to training schools for nurses (preparatory course). The new name is, we think, an improvement on the old one, for it carries with it an idea of the work done and needs no explanation to the uninitiated.

The third course, that of public service, offers one year's work of study and lectures to two classes of applicants, graduates of training schools for nurses, and college students who have had two years' work in biology and chemistry, and who wish to specialize in health protection. The course of study includes such subjects as psychology, personal hygiene and sanitation, bacteriology, food economics, house fitting and sanitation, public sanitation, present health problems and preventive work, principles and procedures in district nursing, organization and administration of nursing associations and nurses' settlements, standard of living, social aspects of crime and abnormality, misery and its causes, efficiency and relief.

Valuable lectures and field work are also given, and affiliation with the Henry Street Settlement, Bellevue and St. Luke's Hospitals, and the School of Philanthropy makes it possible to round out the experience in a most practical manner. A limited number of working scholarships are available. Further information may be had by writing directly to Teachers' College, New York City.

#### A NEW DIRECTORY FOR INSTITUTIONAL POSITIONS

A YEAR ago the JOURNAL established two new bureaus, one for the purchase of books for nurses, the other for supplying institutions with nurses and nurses with positions. The book department has been very successful and will be continued. The directory has been less satisfactory, because the number of nurses applying for positions was so in excess of vacancies to be filled that it seemed impossible to do full justice to those registered, and because it involved for the JOURNAL more correspondence than could be handled without the assistance of a separate business manager. The directory is no longer registering new applicants, though endeavoring to take care of those whose time is unexpired.

Miss M. E. P. Davis, who was in charge of the JOURNAL directory when it was first established and who is now in charge of the central directory of the Graduate Nurses' Association of the District of Colum-

bia, has decided to open a similar directory there, under the name of the "National Directory for Institution and Hospital Positions of the Central Registry for Nurses." Inquiries should be addressed to 1723 G Street, N. W., Washington, D. C.

#### THE TUBERCULOSIS CAMPAIGN IN NEW YORK

THE conference held in Albany on March 18 and 19, ending with a great mass meeting at which President Taft and Governor Hughes were speakers, had as its object the control of the disease in the state with the watchword, "No uncared for tuberculosis in 1915."

These meetings mark the end of the publicity campaign of the State Charities Aid Association and the beginning of the constructive work of providing definitely for the care of every case in "up-state New York." The demand was made for a tuberculosis hospital for every county, and for at least one visiting nurse for each city and village, a free dispensary for each city of 5000 or over, the better reporting of cases, adequate care for the sick, and thorough disinfection after cases of death. Many well-known speakers and workers were present, among them Dr. Trudeau, Dr. Simon Flexner, Homer Folks, Dr. Knopf, and Dr. Goler.

#### MISS COOKE RESIGNS FROM THE PACIFIC COAST JOURNAL

WE understand that Miss Genevieve Cooke has tendered her resignation to the Board of Directors and Council of the California State Nurses' Association as editor and business manager of its official organ, *The Nurses' Journal of the Pacific Coast*.

It was largely due to Miss Cooke's effort that this journal was established and that it has been brought to its professionally influential and stable position as one of the dominating factors in nursing life on the Coast. In its earlier years she assumed the burden of the journal in addition to her other duties, not only giving her services gratuitously, but making room for the journal headquarters in her little apartment.

Such pioneer service can never be estimated in dollars and cents and can only be appreciated fully by those who have performed similar service.

#### IN MEMORIAM

##### ISLA STEWART

THE sudden passing of Miss Isla Stewart, matron and superintendent of nurses for twenty-three years of St. Bartholomew's Hospital, London, has bereft the nursing profession of one of its most admirable and most important members.

Miss Stewart enjoyed a long period of unbroken distinction in her work as a nurse; she was trained at St. Thomas', and not long after was made matron of St. Bartholomew's Hospital, the oldest, the most richly historic of London hospitals; one of the proudest distinction as a royal foundation, and one of which the atmosphere radiated enlightened progressiveness, enthusiasm for ideals, and joy in work. From the beginning, and during her whole administration there, Miss Stewart stood like a tower of strength to support the cause of the progress of nurses out of mediævalism into full professional and legal status. The force of her own unusually rich and complete nature, the weight of her position, than which none was superior, and the moral support of her Sisters were all contributed freely, unchangingly, and devotedly to the cause initiated by Mrs. Fenwick, of bringing nurses out of dependency to complete self-rule and legal recognition as an educated body of professionals. So bitterly resented was this campaign by the conventions and traditions, so hostile the powerful bodies it had to war upon, so troublesome and exhausting the many battles that must be waged, that, among the twelve hospitals usually counted as most important in London, no other matron was courageous enough to stand with her. Others there were, but not in this select circle of the twelve. This shows her strength of conviction and of loyalty; another proof of her rare equipment of character is given in the remarkable fact that she ever preserved the friendly regard and liking of all those against whom she was arrayed in the most uncompromising manner. She had a geniality, a generosity of the heart, a largeness of outlook that distinguished her among others so endowed. Her opinions on all subjects were liberal and broad. She rejoiced in the full development of individuality, yet cultivated all the avenues of co-operation and associated endeavor. Under her sway, the school at St. Bartholomew's remained and is, as it was when she took it, conspicuous for progressiveness and liberality of view, and these characteristics are stamped upon the women who have trained there.

Miss Stewart's death came in the way most workers would have death come—without previous sacrifice of her work; she was in the hospital and in her committee room one day, and three days afterward her spirit had taken its flight. Mrs. Fenwick was with her, and a life-long comradeship of rare quality was thus unbroken to the last.

MARY BROWN OF VIRGINIA, JANUARY, 1910

The recent death of one of our profession is so tragic and unusual that it may properly be brought to the attention of our readers everywhere.

Mary Brown was a native of Virginia, young, trained in a Washington hospital, and but recently graduated. In December last she was engaged to nurse a very sick man in Washington; she had been with him a few weeks and, though improving, he was still in a dangerous condition. One morning late in December she left the sickroom and was in another room speaking with the family when the sick man appeared in the doorway armed with a pistol which he leveled and aimed at his wife. Miss Brown started toward him and was shot full in the breast. Mortally wounded, she reached her patient, secured the pistol and took it from him, went into the hall to the telephone and called the doctor to the house. She then collapsed and was taken to a hospital where, a few days later, she died.

These circumstances attracted much attention in Washington and the newspapers of both Washington and Baltimore commented editorially in the highest terms upon the courage, heroism, and devotion of this young nurse, and her brave facing of duty and danger. At once a movement was begun to secure for her the Carnegie medal for bravery, but her death occurred before the medal could be obtained.

A medal could commemorate this noble deed, but no such testimonial could be finer than the spontaneous sympathy, admiration, and solicitude shown by those who knew Miss Brown professionally, by the surgeon who attended her in vain, and by the press of two cities. Among nurses this event should make an unfading impression. A nurse on a battlefield, in an epidemic, in a city stricken by fire, earthquake or flood; a nurse with a contagious patient in an infected house, or alone at night with an insane person, or closely confined with a victim of specific infection—all these meet danger daily, but not so suddenly and distinctly as she who faced a loaded pistol in the hand of a frenzied man. Unhesitating coolness and courage with immediate prompt action, self-control and presence of mind of the very highest order after receiving a death wound, thoughtfulness for others as long as she could serve them, and fortitude to await her own end during the few hopeless days that remained to her—these are the priceless virtues which this young and unknown nurse brought to her work, and her example is a precious heritage for all of our profession. To few of our number is it given to rise beyond obscurity; but this young Virginian, cut off at the beginning of her days, ranks with the heroines of our history; an example for all whom she left behind, an inspiration for all who know her story, a fit inheritor of the Divine promise "Be ye faithful unto death and I will give you a crown of Life."